

EXHIBIT 1

| | | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------|--|
| 1. Docket Number of Final Issuing Authority CR-0000117-00 | | 2. Comm. Docket Number 253 of 2000 | | 3. State Identification Number 7/11/2000 | | 4. Final Issuing Authority OTN H 055874-0 | |
| 4. Final Issuing Authority to be completed by Final Issuing Authority JAMES R. MOYER, JR. | | | | 5. Transferred from Initial Issuing Authority | | DISTRICT NO. | |
| 6. Name and Address (Last Name First) MILEY, MICHAEL LEE P.O. BOX 33 APT#32 7-9 N. MARKET STREET DUNCANNON, PA 17020 | | | | 7. Date of Transfer | | 8. Docket No. of Initial Issuing Authority CR-0000117-00 | |
| 9. Affiant Who Signed Complaint (Name and Address) CHIEF GARY E. DERR, II DUNCANNON BORO POLICE DEPT. 428 N. HIGH STREET DUNCANNON, PA 17020 | | | | 10. Date of Birth MM DD YY 06 11 76 | | 11. Sex M | |
| 12. Race W | | | | 13. Operator License Number 24986653 | | 14. State PA | |
| 15. ORI PA0500200 | | | | 16. OCA | | 17. Badge Number/Officer I.D. D14 | |
| 18. Date of Arrest MM DD YY 06 28 00 | | 19. Date Complaint Filed or Citation Issued or Filed MM DD YY 06 28 00 | | 20. Summons MM DD 06 28 00 | | 21. Warrant MM DD YY 06 28 00 | |
| 22. Summons Returned MM DD YY 06 28 00 | | 23. Preliminary Arraignment MM DD YY 06 28 00 | | 24. Time 3:05P | | 25. Date Waived to Court MM DD YY 07 07 00 | |
| 26. Prelim. Hear./Sum. Trial | | | | 27. Address of Preliminary Hearing/Summary Trial 17 CHERRY STREET, DUNCANNON, PA 17020 | | | |
| 28. Description of Charges | | | | 29. Offense Date MM DD YY | | 30. Section and Subsection | |
| 1. STATUTORY SEXUAL ASSAULT | | | | F2 | | 06 22 00 | |
| 2. IDS1 PERSON LESS THAN 16 YRS AGE | | | | F1 | | 06 22 00 | |
| 3. C AGGRAV INDEC ASSLT/PERSON LESS 16 YR | | | | F2 | | 06 22 00 | |
| 4. D IND ASSLT PERSON LESS 16 YRS AGE | | | | M2 | | 06 22 00 | |
| 31. Disposition | | | | 32. Date Set For Preliminary Hearing MM DD YY | | 33. C O N T. | |
| WAV | | | | 07 07 00 | | | |
| WD | | | | | | | |
| WAV | | | | | | | |
| WAV | | | | | | | |
| 34. Advised of His Right to Apply for Assignment of Counsel? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | | | | 35. Public Defender Requested by the Defendant? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | | 36. Application Provided for Appointment of Public Defender? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | |
| 37. In cases where so required, I the within named Issuing Authority, did make a reasonable effort to settle the difference between the Defendant and the Complainant on: | | | | MM DD YY | | | |
| 38. Codefendant(s) Name | | | | 39. OTN | | 39. OTN | |
| a | | | | a | | c | |
| b | | | | b | | d | |
| 40. Enter 'C' for witness for Complainant. Enter 'D' for witness for Defendant | | | | 41. Witnesses Names and Addresses and Names and Addresses of persons (not more than 2), Defendant wishes to be Notified for trial | | | |
| 42. Sworn | | | | 43. Testified | | 44. Defense Persons to be notified | |
| 45. Commonwealth | | | | 46. Complainant | | | |
| 47. Defendant WALZ, III, ESQ., SHAUBUT C 341 MARKET ST., NEWPORT, PA 17074 | | | | 48. I.D. No. 15277 | | | |
| 49. Date of Decision MM DD YY | | | | 50. Fines Amount \$.00 | | | |
| 51. Costs \$.00 | | | | 52. Judgment of Sentence BAL: \$.00 | | | |
| Name and Address of Corporate Surety and Agent or Individual Surety-Preliminary Arraignment | | | | | | | |
| Bail at Preliminary Arraignment | | | | 56. Date Bail Posted MM DD YY | | | |
| 53. Type | | | | 54. Amount \$ | | | |
| 55. Date Set MM DD YY | | | | **SEE CURRENT BAIL INFORMATION PAGE** | | | |
| Name and Address of Corporate Surety and Agent or Individual Surety-Preliminary Hearing | | | | | | | |
| Current Bail/Bail at Preliminary Hearing | | | | 60. Date Bail Posted MM DD YY | | | |
| 57. Type | | | | 58. Amount \$ | | | |
| 59. Date Set MM DD YY | | | | **SEE CURRENT BAIL INFORMATION PAGE** | | | |
| 61. If Committed Date 06 28 00 | | 62. Code C | | 63. Place of Commitment PERRY COUNTY PRISON | | 64. Date Transcript Sent to Court MM DD YY 07 07 00 | |
| | | | | NEW BLOOMFIELD | | PA | |

COPY: CLERK OF COURTS

Certified this 7th day of July, 2000

My commission expires first Monday of January, 2006. SEAL

I, the above named Issuing Authority certify that this Transcript is a true and correct Transcript of the Docket.

PRINTED - 7/07/00 13-01-34

EXHIBIT 2

COMMONWEALTH

V.

MICHAEL L. MILEY

:IN THE COURT OF COMMON PLEAS
:OF THE 41ST JUDICIAL DISTRICT
:OF PENNSYLVANIA-
:PERRY COUNTY BRANCH
:NO. 253 of 2000

O R D E R

AND NOW, December 1, 2000, the defendant having appeared with his counsel, Mr. Walz, and having tendered a guilty plea to one (1) count of Aggravated Indecent Assault, a felony of the second degree in full satisfaction of all counts in the Information, the plea is accepted and sentence deferred pending a pre-sentence report.

BY THE COURT,


KEITH B. QUIGLEY, P.J.

cc: DA
S. C. Walz, III, Esq.
✓ Probation
Chief Derr, DPD
File

EXHIBIT 3

BOARD OF PROBATION AND PAROLE

*** SENTENCE PROFILE ***

REPORT DATE 10 31, 2002

Name MILEY MICHAEL LEE Inst : SCIAL SID: 24062821
 Parole #987BV Inst #: EM5931 PRO:

| SENT DATE | # TERM, COUNT, IND | TYPE | MINIMUM YY MM DD | MAXIMUM YY MM DD | OFFENSE / OTN# |
|--------------|--------------------|------|---------------------|---------------------|--------------------------|
| A 01/11/2001 | CP 000700253 ✓ | CC | 03 00 00 | 10 00 00 | AGG IND ASLT M0558740 |

| LETTER DATE\ JUDGE NAME - | COUNTY | TOTAL TIME | | EFF DATE | MIN DATE | MAX DATE |
|------------------------------|--------|---------------------|---------------------|------------|------------|------------|
| | | MINIMUM YY MM DD | MAXIMUM YY MM DD | | | |
| A 10/31/2002 | | 03 00 00 | 10 00 00 | 06/28/2000 | 06/28/2003 | 06/28/2010 |
| C. JOSEPH REHLKAMP | PERRY | | | | | |

EXHIBIT 4

M 3/03

| | | |
|--------|-------------------------|-----------------------------------------------------------|
| DC-16E | SENTENCE STATUS SUMMARY | COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF CORRECTIONS |
|--------|-------------------------|-----------------------------------------------------------|

1. REFERENCES AND IDENTIFICATION

| | | | | | |
|-----------------------------|--------------------------------------|---------|--------------------|------------------------|---------------|
| DOC Number EM5931 | Commitment Name MICHAEL LEE MILEY | PBPP No | SID No 24062821 | FBI Number 50732DB3 | Phila Photo # |
| Date of Birth 06/11/1976 | Place of Birth HARRISBURG PA USA | | | Race W | Sex M |

2. SENTENCE SUMMARY

| Sent Date | County | Indictments | Sent Type | Minimum | | | Maximum | | |
|-----------------|-----------------------------|----------------------|---------------------------------|---------|---|---|---------|---|---|
| | | | | Y | M | D | Y | M | D |
| 01/11/2001 | PERRY | CP253/0700 ✓ | | 3 | | | 10 | | |
| Plea: | Guilty | OTN: M0558740 | Judge: C. JOSEPH REHKAMP | | | | | | |
| Offense: | AGGRAVATED INDECENT ASSAULT | | | | | | | | |

| | | | | |
|---------------------------------|------------|--|--------------------------------------|--|
| Controlling Minimum Date | 06/28/2003 | | Reentered from Previous DOC#: | |
| Controlling Maximum Date | 06/28/2010 | | New Maximum - PV | |

| |
|----------------------------------------------------------------------------------|
| Non-incarcerated Offenses |
| Comments: |
| Summary or Remarks on Sentence |
| DC-16E VERSION 2 CREATED ON 12/31/02 TO REMOVE DETAINERS. NO OTHER CHANGES MADE. |

RECEIVED
Pa. Board of Probation
& Parole

JAN 02 2003 ►

SCHALBION

3. SENTENCE STRUCTURE

| Commitment Credit 06/28/00 TO 01/11/01 | | | | |
|-------------------------------------------|---------------|---------------|---|---|
| Item | Computation 1 | Computation 2 | — | — |
| Indictments Included | CP253/0700 | | | |
| Effective Date | 06/28/00 | | | |
| Expiration of Minimum | 06/28/03 | | | |
| Expiration of Maximum | 06/28/10 | | | |
| Custody for Return - PV | | | | |
| Delinquent Time | | | | |
| Backtime Credit | | | | |
| Backtime Owed | | | | |
| New Maximum - PV | | | | |
| Sentence Computation Date | 06/18/02 | | | |
| Basis for Computation | Initial | | | |
| Total Sentence | 3 - 10 YEARS | | | |
| Status | Active | | | |

4. DETAINERS

| Number | Date | From | Indict-Warrant Nos. | OTN | Type |
|--------|------|------|---------------------|-----|------|
| None | | | | | |

| Detainer Remarks | | |
|------------------|--------------|-----------------------------------------------------------------------------------------------------|
| Detainer # | Date Deleted | Remarks (for those deleted since last DC16E) |
| 1 | 12/31/2002 | INDICT. #S: NT-250, -290, -347-00; MAGISTRATE DISTR. #41-3-03 RELEASED BY JUDGE HOWELL ON 12/31/02. |
| 2 | 12/31/2002 | MAGISTRATE DIST. #41-3-04; AMOUNT DUE: \$483.63 THIS IS A DUPLICATE. |

5. PRIOR DOC NUMBERS

| | | | | | | | | |
|------|--|--|--|--|--|--|--|--|
| None | | | | | | | | |
|------|--|--|--|--|--|--|--|--|

6. FINES, COSTS AND RESTITUTION AT TIME OF RECEPTION

| Date | County | Indictment | Fines | Costs | Restitution |
|------------|--------|------------|-------|----------|-------------|
| 01/11/2001 | PERRY | CP253/0700 | | \$176.00 | |

7. ACTIONS: BOARD OF PARDONS

| Decision Date | File Number | Action | Comments |
|---------------|-------------|--------|----------|
| | | | |

Last Modified by: kmcginnis

EXHIBIT 5

| DC-43 Prescriptive Program Plan | | Commonwealth of Pennsylvania Department of Corrections | | | | (revised 2/00) | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------|------------------------------------|--------------------------------------------------|-----------------------------|----------------------|---------------|-----------------|--|
| DC-Number: <u>EM-5931</u> | | Facility: <u>SLI-ALB</u> | | Custody Level: <u>4</u> | Date of Review: <u>2/03</u> | | | | |
| Name: <u>Miley, Michael</u> | | | | Initiation Date: <u>7-03</u> | | | | | |
| Issues to be Addressed | | | | | | | | | |
| At Reception | Mental Health () Sexual <input checked="" type="checkbox"/> | Vocational () Escape () | Academic () Other () Explain: | Drug/Alcohol <input checked="" type="checkbox"/> | Assaultive () | | | | |
| This Review | Mental Health () Sexual <input checked="" type="checkbox"/> | Vocational () Escape () | Academic () Other () Explain: | Drug/Alcohol <input checked="" type="checkbox"/> | Assaultive () | | | | |
| This plan may change over the course of your incarceration. Additional problem areas may be uncovered. Programs may be completed or additional programs indicated. This plan should be reviewed annually to account for any progress or lack of progress. | | | | | | | | | |
| You are expected to maintain positive housing, work and school reports, and remain misconduct free. | | | | | | | | | |
| Progress or lack of progress on the Prescriptive Program Plan will be one of the factors taken into consideration for all actions requiring staff recommendations for job changes, pre-release and parole. | | | | | | | | | |
| Program | Education Program Type **** | Ed Code **** | Recommend (Y/N) | Date Recommend (waiting list) | Actual Start Date | Actual Complete Date | Removed (Y/N) | Reason Removed* | |
| Work/Education | | | | | | | | | |
| Employability | | | N | | | | | | |
| Academic Education | | 4 | Y | | | | | | |
| Vocational Education | | | Y | | | | | | |
| Facility Job | | | Y | | | | | | |
| Family Relationship/Self | | | | | | | | | |
| Parenting | | | N | | | | | | |
| Breaking Barriers | | | N | | | | | | |
| Health & Wellness | Not mandatory | | Y | | | | | | |
| 55 & Older Program | | | N | | | | | | |
| Long Term Offender | | | N | | | | | | |
| Citizenship/ Personal Responsibility | | | | | | | | | |
| Citizenship Program | | | Y | 7-02 | | | | | |
| Offense Related | | | | | | | | | |
| Drug & Alcohol Education** | | | N | | | | | | |
| D/A Outpatient/Treatment** | Group Therapy | | Y | 5-01 | | | | | |
| D/A Therapeutic Comm.** | | | Y | | | | | | |
| Sex Off. Program Orientation*** | | | Y | | | | | | |
| Sex Off. Program Treatment*** | | | Y | | | | | | |
| Anger Management | | | Y | 7-02 | | | | | |
| Act 143 (Victim Awareness) | | | Y | | | 2-01 | | | |
| Release Planning | | | | | | | | | |
| Formulate Parole Plan | | | Y | Ongoing | | | | | |
| Pay \$30 Act 27 of 1995 Fee | | | Y | | | | | | |
| Pre-release eligibility date | | | N/A | | | | | | |
| Other | | | | | | | | | |
| Comments on recommendations for this rating period | | | | | | | | | |
| Comments on progress from last rating period | | | | | | | | | |

Karla Hogan
Signature of Staff

Michael Miley
Signature of Inmate

2/03
Date of Next Review

*Removal Codes: PA - Poor Attendance, PP - Poor Participation, MH - Mental Health Commitment, MI - Misconduct, WR - Writ, DI - Disruptive, SM - Self Removal
 ** D/A Programs: Assignment in conjunction with D/A Staff
 ***Sex Off. Programs: Assignment in conjunction with sex offender treatment staff
 ****Academic - 1 - Spec. Ed, 2 - ESL, 3 - Lit, 4 - ABE, 5 - GED. Vocational - 1 - part-time, 2 - full-time, 3 - Accredited

WHITE - DC-15 YELLOW - Inmate After Progress Review

PINK - Other

GOLDENROD - Inmate When Initiated

COMPLETED TREATMENT/EDUCATIONAL PROGRAMS

Inmate Name Miley, MichaelInmate # EM5931

| Date Completed | Program Title |
|----------------|---------------|
| 2/28/01 | ACT 143 |
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cc: DC-14
DC-15

EXHIBIT 6

DC43 Correctional Plan for MICHAEL LEE MILEY**EM5931**

Location: D-A-2057

Correctional Plan

| Program | | Recommended By | Recmd Date | Status |
|---------|--------------------------|------------------|------------|-----------------|
| MFR | Misconduct Free Behavior | Webb, Karla Jean | 01/09/2004 | Pending Program |
| PSTHR | Positive Housing Reports | Webb, Karla Jean | 01/09/2004 | Pending Program |
| PWR | Positive Work Reports | Webb, Karla Jean | 01/09/2004 | Pending Program |
| A86 | Act 86 | Webb, Karla Jean | 01/09/2004 | Pending Program |
| CR | COR | Webb, Karla Jean | 01/09/2004 | Pending Program |
| SCUR | Sex Offender Core | Webb, Karla Jean | 01/09/2004 | Pending Program |
| SMAIN | Sex Offender Maintenance | Webb, Karla Jean | 01/09/2004 | Pending Program |
| ABE | Adult Basic Education | Webb, Karla Jean | 01/09/2004 | Pending Program |

Completed Intermediate SOP on 2-18-04 KW

Karla Webb
Staff

1-9-04
Date

Michael Miley
Inmate

01-9-04
Date

COMPLETED TREATMENT/EDUCATIONAL PROGRAMS

Miley, Michael

EM 5931

[illegible]

DC-14
DC-15

EXHIBIT 7



COMMONWEALTH OF PENNSYLVANIA
BOARD OF PROBATION AND PAROLE

1101 S. Front Street
Harrisburg, Pa. 17104 - 2519

NOTICE OF BOARD DECISION

NAME: MICHAEL LEE MILEY
INSTITUTION: SCI - ALBION

PAROLE NO: 987BV
INSTITUTION NO: EM5931

AS RECORDED ON APRIL 04, 2003 THE BOARD OF PROBATION AND PAROLE RENDERED THE FOLLOWING DECISION IN YOUR CASE:

FOLLOWING AN INTERVIEW WITH YOU AND A REVIEW OF YOUR FILE, AND HAVING CONSIDERED ALL MATTERS REQUIRED PURSUANT TO THE PAROLE ACT OF 1941, AS AMENDED, 61 P.S. § 331.1 ET SEQ., THE BOARD OF PROBATION AND PAROLE, IN THE EXERCISE OF ITS DISCRETION, HAS DETERMINED AT THIS TIME THAT: YOUR BEST INTERESTS DO NOT JUSTIFY OR REQUIRE YOU BEING PAROLED/REPAROLED; AND, THE INTERESTS OF THE COMMONWEALTH WILL BE INJURED IF YOU WERE PAROLED/REPAROLED. THEREFORE, YOU ARE REFUSED PAROLE/REPAROLE AT THIS TIME. THE REASONS FOR THE BOARD'S DECISION INCLUDE THE FOLLOWING:

YOUR VERSION OF THE NATURE AND CIRCUMSTANCES OF THE OFFENSE(S) COMMITTED.

YOUR REFUSAL TO ACCEPT RESPONSIBILITY FOR THE OFFENSE(S) COMMITTED.

YOUR LACK OF REMORSE FOR THE OFFENSE(S) COMMITTED.

THE RECOMMENDATION MADE BY THE DEPARTMENT OF CORRECTIONS.

REPORTS, EVALUATIONS AND ASSESSMENTS CONCERNING YOUR PHYSICAL, MENTAL AND BEHAVIOR CONDITION AND HISTORY.

YOUR NEED TO PARTICIPATE IN AND COMPLETE ADDITIONAL INSTITUTIONAL PROGRAMS.

YOUR INTERVIEW WITH THE HEARING EXAMINER AND/OR BOARD MEMBER.

(CONTINUE ON PAGE 2)

FILE COPY

[Handwritten signature]

PAROLE NO: 987BV

(CONTINUED FROM PAGE 1)

YOU WILL BE REVIEWED IN OR AFTER MARCH, 2005.

AT YOUR NEXT INTERVIEW, THE BOARD WILL REVIEW YOUR FILE AND CONSIDER:

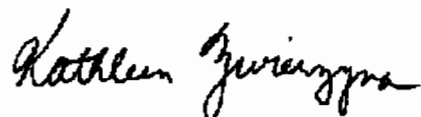
WHETHER YOU HAVE SUCCESSFULLY COMPLETED A TREATMENT PROGRAM FOR:
SEX OFFENDERS.

WHETHER YOU HAVE RECEIVED A FAVORABLE RECOMMENDATION FOR PAROLE FROM THE
DEPARTMENT OF CORRECTIONS.

WHETHER YOU HAVE RECEIVED A CLEAR CONDUCT RECORD AND COMPLETED THE DEPARTMENT
OF CORRECTIONS' PRESCRIPTIVE PROGRAM(S).

SLS 04-04-2003

FILE COPY

A handwritten signature in black ink, appearing to read "Kathleen Zwierzyna". The signature is fluid and cursive, with the first name "Kathleen" written in a larger, more prominent script than the last name "Zwierzyna".

Kathleen Zwierzyna
Board Secretary

EXHIBIT 8



COMMONWEALTH OF PENNSYLVANIA
BOARD OF PROBATION AND PAROLE

1101 S. Front Street
Harrisburg, Pa. 17104 - 2519

NOTICE OF BOARD DECISION

NAME: MICHAEL LEE MILEY
INSTITUTION: SCI - ALBION

PAROLE NO: 987BV
INSTITUTION NO: EM5931

AS RECORDED ON MARCH 22, 2005 THE BOARD OF PROBATION AND PAROLE RENDERED THE FOLLOWING DECISION IN YOUR CASE:

FOLLOWING AN INTERVIEW WITH YOU AND A REVIEW OF YOUR FILE, AND HAVING CONSIDERED ALL MATTERS REQUIRED PURSUANT TO THE PAROLE ACT OF 1941, AS AMENDED, 61 P.S. § 331.1 ET SEQ., THE BOARD OF PROBATION AND PAROLE, IN THE EXERCISE OF ITS DISCRETION, HAS DETERMINED AT THIS TIME THAT: YOUR BEST INTERESTS DO NOT JUSTIFY OR REQUIRE YOU BEING PAROLED/REPAROLED; AND, THE INTERESTS OF THE COMMONWEALTH WILL BE INJURED IF YOU WERE PAROLED/REPAROLED. THEREFORE, YOU ARE REFUSED PAROLE/REPAROLE AT THIS TIME. THE REASONS FOR THE BOARD'S DECISION INCLUDE THE FOLLOWING:

YOUR VERSION OF THE NATURE AND CIRCUMSTANCES OF THE OFFENSE(S) COMMITTED.

YOUR NEED TO PARTICIPATE IN AND COMPLETE ADDITIONAL INSTITUTIONAL PROGRAMS.

YOUR INTERVIEW WITH THE HEARING EXAMINER AND/OR BOARD MEMBER.

YOU WILL BE REVIEWED IN OR AFTER MARCH, 2006.

AT YOUR NEXT INTERVIEW, THE BOARD WILL REVIEW YOUR FILE AND CONSIDER:

WHETHER YOU HAVE PARTICIPATED IN/SUCCESSFULLY COMPLETED A TREATMENT PROGRAM FOR: SEX OFFENDERS.

WHETHER YOU HAVE RECEIVED A FAVORABLE RECOMMENDATION FOR PAROLE FROM THE

(CONTINUE ON PAGE 2)

FILE COPY

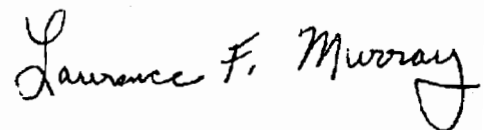
[Handwritten signature]

PAROLE NO: 987BV—

(CONTINUED FROM PAGE 1)
DEPARTMENT OF CORRECTIONS.

SLS 03/22/2005

FILE COPY

A handwritten signature in cursive script that reads "Lawrence F. Murray". The signature is written in dark ink and is positioned above the printed name and title.

Lawrence F. Murray
Board Secretary